

JAN 19 2005

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To: U.S. Patent and Trademark Office – **From:** Christian R. Andersen
Examiner: T.D. NGUYEN Sr. Paralegal – Intellectual Property
Group Art Unit: 2665

Fax: 703-872-9306 **Pages**
with 27
Cover:

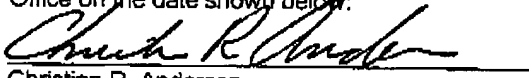
FORMAL SUBMISSION OF:

- 1) **Amendment Transmittal; and**
- 2) **Amendment in Response to Non-Final Office Action.**

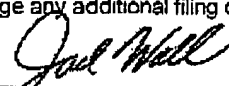
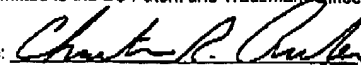
Title: VERTICAL SERVICES INTEGRATION ENABLED CONTENT DISTRIBUTION
MECHANISMS
Serial No. 09/835,649
Filing Date: April 17, 2001
First Named Inventor: Robert T. BAUM
Atty. No. 00-VE24.35

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that the above-referenced documents are facsimile transmitted to the Patent and Trademark Office on the date shown below:


Christian R. Andersen

Date of Transmission: January 19, 2005

AMENDMENT TRANSMITTAL LETTER				Docket No. 00-VE24.35																																					
Application No. 09/835,649	Filing Date April 17, 2001	Examiner T.D. Nguyen	Art Unit 2665																																						
Applicant(s): Robert T. Baum et al.																																									
Invention: VERTICAL SERVICES INTEGRATION ENABLED CONTENT DISTRIBUTION MECHANISMS																																									
TO THE COMMISSIONER FOR PATENTS																																									
Transmitted herewith is an amendment in the above-identified application.																																									
The fee has been calculated and is transmitted as shown below.																																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;"></th> <th style="width: 15%;">Claims Remaining After Amendment</th> <th style="width: 15%;">Highest Number Previously Paid</th> <th style="width: 15%;">Number Extra Claims Present</th> <th style="width: 15%;">Rate</th> <th style="width: 20%;"></th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td style="text-align: center;">-</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td style="text-align: center;">-</td> <td style="text-align: center;">=</td> <td style="text-align: center;">0</td> <td style="text-align: center;">x</td> <td></td> </tr> <tr> <td colspan="5" style="padding: 5px;">Multiple Dependent Claims (check if applicable) <input type="checkbox"/></td> <td></td> </tr> <tr> <td colspan="5" style="padding: 5px;">Other fee (please specify):</td> <td></td> </tr> <tr> <td colspan="5" style="padding: 5px;">TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</td> <td style="text-align: center; padding: 5px;">0.00</td> </tr> </tbody> </table>							Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		Total Claims	-	=	0	x		Independent Claims	-	=	0	x		Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						Other fee (please specify):						TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate																																					
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Independent Claims	-	=	0	x																																					
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>																																									
Other fee (please specify):																																									
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<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity																																									
<input checked="" type="checkbox"/> No additional fee is required for this amendment.																																									
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____ A duplicate copy of this sheet is enclosed.																																									
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.																																									
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.																																									
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>07-2347</u> as described below. A duplicate copy of this sheet is enclosed.																																									
<input checked="" type="checkbox"/> Credit any overpayment.																																									
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.																																									
 Joel Wall, Attorney for Applicants Attorney Reg. No.: 25,648 VERIZON CORPORATE SERVICES GROUP, INC. c/o Christian Andersen 600 Hidden Ridge / Mailcode HQE03H14 Irving, TX 75038 (977) 718-4800 Customer No. 32127					Dated: <u>January 19, 2005</u>																																				
<div style="text-align: center;">Amendment Transmittal</div> I hereby certify that this correspondence is being facsimile transmitted to the US Patent and Trademark Office, facsimile no. (703) 672-9306, on the date shown below.																																									
Dated: January 19, 2005			Signature:  (Christian R. Andersen)																																						

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Dated: 1-19-2005

Signature:


(Christian Andersen)Docket No.: 00-VE24.35
(PATENT)**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Patent Application of:
Robert T. Baum

Application No.: 09/835,649

Art Unit: 2665

Filed: April 17, 2001

Examiner: NGUYEN, Toan D.

For: VERTICAL SERVICES INTEGRATION
ENABLED CONTENT DISTRIBUTION
MECHANISMS

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated October 20, 2004 (Paper No. 10/15/04) ("Office Action"), please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 19 of this paper.